Child PTSD Symptom Scale For DSM-V

Name: Tad Spencer **Date:** August 8, 2023

Please write down the event that's distressing, scary, or bothering you the most when you think of it.

My family and I experienced heavy flooding during a rainstorm wherein the flood reached the top of our roof.

How long since the event? When did it happen?

It happened around two months ago.

Instructions (Part 1):

Read each question carefully. Then, select the number that best describes how often that problem has bothered you IN THE PAST MONTH.

0	1	2	3	4
Not at all	Once a week or less/a little	2 to 3 times a week/somewhat	4 to 5 times a week/a lot	6 or more times a week/almost always

	0	1	2	3	4
1. Having upsetting thoughts or pictures about it that came into your head when you didn't want them to	☐	☐	☑	☐	☐
2. Having bad dreams or nightmares	☐	☑	☐	☐	☐
3. Acting or feeling as if it was happening again (seeing or hearing something and feeling as if you are there again)	☐	☐	☐	☑	☐
4. Feeling upset when you remember what happened (for example, feeling scared, angry, sad, guilty, confused)	☐	☐	☐	☑	☐

5. Having feelings in your body when you remember what happened (for example, sweating, heart beating fast, stomach or head hurting)	☐	☐	☑	☐	☐
6. Trying not to think about it or have feelings about it	☐	☐	☑	☐	☐
7. Trying to stay away from anything that reminds you of what happened (for example, people, places, or conversations about it)	☐	☐	☐	☐	☑
8. Not being able to remember an important part of what happened	☐	☐	☐	☑	☐
9. Having bad thoughts about yourself, other people, or the world (for example, “I can’t do anything right”, “All people are bad”, “The world is a scary place”)	☐	☐	☑	☐	☐
10. Thinking that what happened is your fault (for example, “I should have known better”, “I shouldn’t have done that”, “I deserved it”)	☑	☐	☐	☐	☐
11. Having strong bad feelings (like fear, anger, guilt, or shame)	☐	☐	☑	☐	☐
12. Having much less interest in doing things you used to do	☑	☐	☐	☐	☐
13. Not feeling close to your friends or family or not wanting to be around them	☑	☐	☐	☐	☐
14. Trouble having good feelings (like happiness or love) or trouble having any feelings at all	☑	☐	☐	☐	☐
15. Getting angry easily (for example, yelling, hitting others, throwing things)	☑	☐	☐	☐	☐
16. Doing things that might hurt yourself (for example, taking drugs, drinking alcohol, running away, cutting yourself)	☑	☐	☐	☐	☐
17. Being very careful or on the lookout for danger (for example, checking to see who is around you and what is around you)	☐	☐	☐	☐	☑
18. Being jumpy or easily scared (for example, when someone walks up behind you, when you hear a loud noise)	☐	☐	☑	☐	☐
19. Having trouble paying attention (for example, losing track of a story on TV, forgetting what you read, unable to pay attention in class)	☐	☑	☐	☐	☐
20. Having trouble falling or staying asleep	☐	☐	☑	☐	☐

Instructions (Part 2):

Answer yes or no if the problems above have been getting in the way of the following parts of your life IN THE PAST MONTH.

Yes	No	
☑	☐	21. Fun things you want to do
☑	☑	22. Doing your chores
☐	☑	23. Relationships with your friends
☑	☐	24. Praying
☑	☐	25. Schoolwork
☐	☑	26. Relationships with your family
☑	☐	27. Being happy with your life

Final Score: 33

Notes:

Possibility of having PTSD is high.